PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10416-15

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			14					RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			/ \(\varphi\) minus 20=		· P		5	(\$ 9=		OR	X\$18=		
IND	EPENDENT C	LAIMS	3 minus 3 =		* P			X42=		1	X84=		· wys.
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT				\vdash			OR		<u></u>	**
* If	the difference	in column 1 is	less than z	ero ente	r "0" in c	"0" in column 2		140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2 CLAIMS AS AMENDED - PART II								OTAL		OR	TOTAL	140	Mar L
		(Column 1)	KIAIEIADET	Colur)		(Column 3)	S	SMALL ENTITY		OR	OTHER THAN OR SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	· >	(\$ 9 = ,	8 d. 34	ÓR	X\$18=	See Sta	e t ie:
	Independent	*	Minus	***		=		(42=		OR	X84=	el competication	er goden er er e
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							140=	14. July 1	est (i)	+280=	ું કહેં મુખ્ય લો :	€ (*)
			TOTAL	enikerikasi. Papakensi P	OR	TOTAL	Keep Manual Conference	HEP					
1	`	ADD	IT. FEE		OR	addit. Fee	1						
AMENDMENT		(Column 1) CLAIMS REMAINING		(Colur HIGH NUM	IEST	(Column 3) PRESENT			ADDI-	a Two	18.3	ADDI-	
		AFTER AMENDMENT		PREVIO PAID	DUSLY	EXTRA	F A	ATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	. 17	Minus	**	20	-	×	\$ 9=		OR	X\$18=	3 ²³ + 938 - 1 + 4	
ME	Independent	* H	Minus	***	ろ	= /		(42=		OR	X84=	245	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								*	OR		000	
+140= TOTAL											+280= TOTAL		
		ADD	IT. FEE	``````````````````````````````````````	OR	ADDIT. FEE		****					
		(Column 1) CLAIMS		(Colur HIGH	EST	(Column 3)		· 	ADDI	İ		ADDI	7
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	40
	Total	*	Minus	**		=	X	\$ 9=	,	OR	X\$18=	-	•
	Independent	*	Minus	***		= 1	X	42=	*	OR	X84=	V (1)	27.25
لـــا	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							40-			+280=		3) B
* If the entry in column 1 is less than the entry in column 2, writ "0" in column 3.													
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, nt r "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, nter "3." Th "High st Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												<u> </u>	,
	ııı ⊓ıgri stinum	iber Previously Pai	u ror" (IOIAI O	rinaependi	ent) is the	nignest number	TOUNG I	п тле арр	ropriate box	in col	umn 1.		